## TITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUES FOR PATENT FEE REFUND					
1 Date of Request: 2 Serial/Patent # 08/23/565					
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
*	Filing				\$ 240 2.00
	Amendment				\$
/	Extension of Time				\$
	Notice of Appeal/Appeal				\$
	Petition				\$
	Issue				\$
	Cert of Correction/Terminal Disc	c.			\$
	Maintenance				\$
·	Assignment	1			\$
	Other 8/19/9	74			\$
THE CONTROL THE DOT CHARLE			7 TOTAL AMOUNT 22.60 s 24.56, cc		
ase for the Alle fee.		8 TO BE REFUNDED BY:			
10 REASON!		Treasury Check			
*	Overpayment Case of Texplication	D,	Credit Deposit A/C #:		
	Duplicate Payment Pleasen SHALE	iu	9 /	13 4	500
	No Fee Due (Explanation)		(20)		
CANCELLER					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME:  SIGNATURE:  TITLE: Leg E  PHONE: 308-1202					
SIGNATURE: PHONE: 308-1202					
office: OWAR					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: Cludrey Swyman DATE: 8/19/94					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

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